

Exhibit 4



SEA MAR OCEAN SHORES MEDICAL

 597 POINT BROWN AVE NW  
 OCEAN SHORES, WA 98569  
 P: (360) 289-2427  
 F: (360) 289-9982

Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Date of Encounter: 04/25/2012 01:21 PM

**History of Present Illness** (Penny Faires, MD 04/25/2012 01:33 PM)

Patient words: Pt has been waking up with muscle spasms that affect her right hip and left shoulder. This happens episodically since pt had Mono Jan 2009. Currently has been occurring every morning for the past 4 days. Pt did a year of PT a year ago which helped some as does taking minerals.

The patient is a 22 year old female is here for an office visit. The patient describes symptom/s as back pain and muscle pain. The symptoms have been worsening. Patient was identified by date of birth and name. Pain screening by the medical assistant: The pain is described as being located in back and right lower extremity. The pain has been occurring in an intermittent pattern. The patient was screened for the risk of depression with the following two questions: Over the last 2 weeks have you felt down depressed or hopeless? no. Over the past 2 weeks have you felt little interest or pleasure in doing things? no.

**History**

Chassidy Jones, MA 04/25/2012 01:28 PM

**Allergy**

Amoxicillin \*PENICILLINS\*

**Social**

Non smoker / no tobacco use

**Review of Systems** (Penny Faires, MD; 04/25/2012 01:32 PM)**General:** Not Present- Chills, Fever and unexplained wt loss.**Skin:** Not Present- Rash.**HEENT:** Not Present- Headache, Visual Loss and Sore Throat.**Neck:** Not Present- Neck Stiffness.**Respiratory:** Not Present- Cough and Dyspnea.**Cardiovascular:** Not Present- Chest Pain.**Gastrointestinal:** Not Present- Abdominal Pain, Nausea and Vomiting.**Female Genitourinary:** Not Present- Pelvic Pain.**Musculoskeletal:** Not Present- Joint Swelling.**Neurological:** Not Present- Focal Neurological Symptoms.**Psychiatric:** Not Present- Depression and Personality Changes.**Hematology:** Not Present- Abnormal Bleeding.**Vitals** (Chassidy Jones, MA; 04/25/2012 01:28 PM)

04/25/2012 01:24 PM

**Weight:** 280 lb **Height:** 64 in**Body Surface Area:** 2.39 m<sup>2</sup> **Body Mass Index:** 48.06 kg/m<sup>2</sup>**Pain level:** 6/10**Temp.:** 98.1 °F (Temporal) **Pulse:** 76 (Regular) **Resp.:** 16 (Unlabored)**BP:** 116/82 Manual (Sitting, Left Arm, Standard)

Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Thursday, January 17, 2013

**Physical Exam** (Penny Faires, MD; 04/25/2012 01:35 PM)  
The physical exam findings are as follows:

**General**

**Mental Status** - Alert. **General Appearance** - Cooperative. **Orientation** - Oriented X4.

**Musculoskeletal**

**Spine/Ribs/Pelvis**

**Lumbosacral Spine:**

**Inspection and Palpation:** Muscle tone - rigidity. Note: right hip area

**Upper Extremity**

**Shoulder:**

**Inspection and Palpation:** Muscle tone - rigidity, (L).

**Assessment & Plan** (Penny Faires, MD; 04/25/2012 01:36 PM)

**Muscle spasm (728.85)**

**Today's Impression:** Will try flexeril as has worked in the past. If continues to worsen, will repeat PT.

**Current Plans:**

- Flexeril 10MG, 1 Tablet TID, #90, 04/25/2012, Ref. x2. Active.

**Medical decision-making**



Penny Faires MD

**Exhibit 5**



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Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Date of Encounter: 05/07/2012 12:59 PM

**History of Present Illness** (Penny Faires, MD 05/07/2012 01:13 PM)

Patient words: Pt here with continued sciatic pain. Was seen in ER on 5/3/12 and given a toradol shot which she had a reaction to with swelling at the site of injection and hives. Now has worsening numbness of her groin.

The patient is a 22 year old female is here for an office visit. Patient comes to clinic for follow-up of last visit. The patient describes symptom/s as back and muscle spasm. The symptoms have been worsening. Patient was identified by date of birth and name. Pain screening by the medical assistant: The pain is described as being located in back and right lower extremity (hip). The pain has been occurring in a persistent pattern. The patient was screened for the risk of depression with the following two questions: Over the last 2 weeks have you felt down depressed or hopeless? no. Over the past 2 weeks have you felt little interest or pleasure in doing things? no.

**History**

There is no documented history at this time.

**Review of Systems** (Penny Faires, MD; 05/07/2012 01:14 PM)

**General:** Not Present- Chills, Fever and unexplained wt loss.

**Skin:** Not Present- Rash.

**HEENT:** Not Present- Headache, Visual Loss and Sore Throat.

**Neck:** Not Present- Neck Stiffness.

**Respiratory:** Not Present- Cough and Dyspnea.

**Cardiovascular:** Not Present- Chest Pain.

**Gastrointestinal:** Not Present- Abdominal Pain, Nausea and Vomiting.

**Female Genitourinary:** Not Present- Pelvic Pain.

**Musculoskeletal:** Not Present- Joint Swelling.

**Neurological:** Present- Focal Neurological Symptoms.

**Psychiatric:** Not Present- Depression and Personality Changes.

**Hematology:** Not Present- Abnormal Bleeding.

**Vitals** (Chassidy Jones, MA; 05/07/2012 01:03 PM)

05/07/2012 01:01 PM

**Weight:** 280 lb **Height:** 64 in

**Body Surface Area:** 2.39 m<sup>2</sup> **Body Mass Index:** 48.06 kg/m<sup>2</sup>

**Pain level:** 8/10

**Temp.:** 98.3 °F (Temporal) **Pulse:** 78 (Regular) **Resp.:** 16 (Unlabored)

**BP:** 102/60 Manual (Sitting, Left Arm, Standard)

**Physical Exam** (Penny Faires, MD; 05/07/2012 01:17 PM)

The physical exam findings are as follows:

**General**

**Mental Status** - Alert. **General Appearance** - Cooperative. **Orientation** - Oriented X4.

**Musculoskeletal****Spine/Ribs/Pelvis**

**Pelvic Region: Deformities/Malalignments/Discrepancies** - Note: lower lumbar/gluteal swelling/warmth/tenseness without any focal evidence of infection on the right only

Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Thursday, January 17, 2013

**Assessment & Plan** (Penny Faires, MD; 05/07/2012 01:20 PM)

**Muscle spasm (728.85)**

Current Plans:

**Sciatica of right side (724.3)**

**Today's Impression:** Will provide with steroid and pain medication with close monitoring.

Current Plans:

- Percocet 10-650MG, 1 Tablet every six hours, as needed, #60, 05/07/2012, No Refill. Active.
- PredniSONE 20MG, 1 Tablet daily, #5, 5 days starting 05/07/2012, No Refill. Active.

**Medical decision-making**



Penny Faires MD

**Exhibit 6**



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Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Date of Encounter: 05/15/2012 02:59 PM

**History of Present Illness** (Penny Faires, MD 05/15/2012 03:13 PM)

Patient words: Pt had some mild improvement on prednisone, but she has had two bad nights with continued pain and has been having difficulty with urination.

The patient is a 22 year old female is here for an office visit. Patient comes to clinic for follow up of Back and leg pain. Patient was identified by date of birth and name. Pain screening by the medical assistant: The pain is described as being located in back, right lower extremity and left lower extremity. The patient was screened for the risk of depression with the following two questions: Over the last 2 weeks have you felt down depressed or hopeless? no. Over the past 2 weeks have you felt little interest or pleasure in doing things? no. At today's visit the patient is accompanied by Dad.

**History**

Carol Ford, LPN 05/15/2012 03:00 PM

**Allergy**

Amoxicillin \*PENICILLINS\*

**Social**

Non smoker / no tobacco use

**Review of Systems** (Penny Faires, MD; 05/15/2012 03:14 PM)**General:** Not Present- Chills, Fever and unexplained wt loss.**Skin:** Not Present- Rash.**HEENT:** Not Present- Headache, Visual Loss and Sore Throat.**Neck:** Not Present- Neck Stiffness.**Respiratory:** Not Present- Cough and Dyspnea.**Cardiovascular:** Not Present- Chest Pain.**Gastrointestinal:** Not Present- Abdominal Pain, Nausea and Vomiting.**Female Genitourinary:** Not Present- Pelvic Pain.**Musculoskeletal:** Not Present- Joint Swelling.**Neurological:** Not Present- Focal Neurological Symptoms.**Psychiatric:** Not Present- Depression and Personality Changes.**Hematology:** Not Present- Abnormal Bleeding.**Vitals** (Carol Ford, LPN; 05/15/2012 03:03 PM)

05/15/2012 03:01 PM

**Pain level:** 7/10 **LMP:** 04/18/2012**Temp.:** 98.7 °F **Pulse:** 112 (Regular) **Resp.:** 16 (Unlabored)**BP:** 130/90 Manual (Sitting, Left Arm, Standard)**Physical Exam** (Penny Faires, MD; 05/15/2012 03:15 PM)

The physical exam findings are as follows:

**General****Mental Status** - Alert. **General Appearance** - Cooperative. **Orientation** - Oriented X4.**Musculoskeletal****Spine/Ribs/Pelvis****Lumbosacral Spine:** Examination of the lumbosacral spine reveals - Note: visible muscular swelling over lumbar spine with no tenderness in palpation

Alisha Briggs

Patient #: 793180

DOB: 08/21/1989 (23 years)

Thursday, January 17, 2013



**Assessment & Plan** (Penny Falres, MD; 05/15/2012 03:18 PM)**Sciatica of right side (724.3)**

**Today's Impression:** Pt not improving as expected and has already done a course of prednisone so will cover for pain and do further w/up.

**Current Plans:**

- METABOLIC PANEL, COMPREHENSIVE - PeaceHealth/Labcorp (80053); Routine
- CBC W/ Partial Diff - Labcorp (85025); Routine
- ROUTINE VENIPUNCTURE (36415); Routine
- Percocet 10-650MG, 1 Tablet every six hours, as needed, #60, 05/15/2012, No Refill. Active.
- Pt is being referred for MRI

Location: lumbar and sacral spine to assess prolonged sciatica with difficulty urinating.  
w/ or w/o contrast: at radiologist discretion

- Pt is being referred for ORTHOPEDICS

**Laboratories****METABOLIC PANEL, COMPREHENSIVE - PeaceHealth/Labcorp (80053)** (Final, Reviewed) (Collected: 05/15/2012)

Diagnosis: Sciatica of right side (724.3) Result Note: PATIENT NOT FASTING

PERFORMED BY: SE LabCorp Seattle 550 17th Avenue Ste 300 Seattle WA 981225789 2068617000

Glucose, Serum	130 (abn) mg/dL	(Normal Range: 65-99 mg/dL)
BUN	10 mg/dL	(Normal Range: 6-20 mg/dL)
Creatinine, Serum	0.69 mg/dL	(Normal Range: 0.57-1.00 mg/dL)
eGFR If NonAfricn Am	124 mL/min/1.73	(Normal Range: >59 mL/min/1.73)
eGFR If Africn Am	143 mL/min/1.73	(Normal Range: >59 mL/min/1.73)
BUN/Creatinine Ratio	14	(Normal Range: 8-20)
Sodium, Serum	146 (abn) mmol/L	(Normal Range: 134-144 mmol/L)
Potassium, Serum	3.7 mmol/L	(Normal Range: 3.5-5.2 mmol/L)
Chloride, Serum	102 mmol/L	(Normal Range: 97-108 mmol/L)
Carbon Dioxide, Total	24 mmol/L	(Normal Range: 20-32 mmol/L)
Calcium, Serum	9.9 mg/dL	(Normal Range: 8.7-10.2 mg/dL)
Protein, Total, Serum	7.8 g/dL	(Normal Range: 6.0-8.5 g/dL)
Albumin, Serum	5.0 g/dL	(Normal Range: 3.5-5.5 g/dL)
Globulin, Total	2.8 g/dL	(Normal Range: 1.5-4.5 g/dL)
A/G Ratio	1.8	(Normal Range: 1.1-2.5)
Bilirubin, Total	0.5 mg/dL	(Normal Range: 0.0-1.2 mg/dL)
Alkaline Phosphatase, S	52 IU/L	(Normal Range: 25-150 IU/L)
AST (SGOT)	22 IU/L	(Normal Range: 0-40 IU/L)
ALT (SGPT)	49 (abn) IU/L	(Normal Range: 0-40 IU/L)

**CBC W/ Partial Diff - Labcorp (85025)** (Final, Reviewed) (Collected: 05/15/2012)

Diagnosis: Sciatica of right side (724.3) Result Note: PATIENT NOT FASTING

PERFORMED BY: SE LabCorp Seattle 550 17th Avenue Ste 300 Seattle WA 981225789 2068617000

Clinical Information: Discount=None

WBC	7.9 x10E3/uL	(Normal Range: 4.0-10.5 x10E3/uL)
RBC	5.03 x10E6/uL	(Normal Range: 3.80-5.10 x10E6/uL)
Hemoglobin	14.1 g/dL	(Normal Range: 11.5-15.0 g/dL)
Hematocrit	42.6 %	(Normal Range: 34.0-44.0 %)
MCV	85 fL	(Normal Range: 80-98 fL)
MCH	28.0 pg	(Normal Range: 27.0-34.0 pg)
MCHC	33.1 g/dL	(Normal Range: 32.0-36.0 g/dL)
RDW	13.8 %	(Normal Range: 11.7-15.0 %)
Platelets	223 x10E3/uL	(Normal Range: 140-415 x10E3/uL)
Neutrophils	64 %	(Normal Range: 40-74 %)
Lymphs	23 %	(Normal Range: 14-46 %)
Monocytes	10 %	(Normal Range: 4-13 %)
Eos	2 %	(Normal Range: 0-7 %)
Basos	1 %	(Normal Range: 0-3 %)
Immature Cells		
Neutrophils (Absolute)	5.2 x10E3/uL	(Normal Range: 1.8-7.8 x10E3/uL)
Lymphs (Absolute)	1.8 x10E3/uL	(Normal Range: 0.7-4.5 x10E3/uL)
Monocytes (Absolute)	0.8 x10E3/uL	(Normal Range: 0.1-1.0 x10E3/uL)
Eos (Absolute)	0.1 x10E3/uL	(Normal Range: 0.0-0.4 x10E3/uL)
Baso (Absolute)	0.0 x10E3/uL	(Normal Range: 0.0-0.2 x10E3/uL)
Immature Granulocytes	0 %	(Normal Range: 0-2 %)
Immature Grans (Abs)	0.0 x10E3/uL	(Normal Range: 0.0-0.1 x10E3/uL)
NRBC		
Hematology Comments:		

**Medical decision-making****Amount/complexity of data to be reviewed:**

- Order and/or review of lab test(s)



Penny Faires MD